

## APPLICATION DATA SHEET

### **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Sequence submission?:: Paper

Computer Readable Form  
(CRF)?:: Yes

Number of copies of CRF:: 1

Title:: MODIFIED POLYPEPTIDES STABILIZED IN A DESIRED CONFORMATION AND  
METHODS FOR PRODUCING SAME

Attorney Docket Number:: CBN-002CP

Request for Early Publication?:: No

Request for Non-Publication?:: No

Total Drawing Sheets:: 12

Small Entity?:: Yes

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Timothy

Middle Name:: A.

Family Name:: Springer

City of Residence:: Newton

State or Province of  
Residence:: MA

Country of Residence::US

Street of mailing address:: 36 Woodman Road

City of mailing address::Newton

State or Province of  
mailing address:: MA

0045265-083101  
TORERO-5224660

09045266 063101

Country of mailing address:: US

Postal or Zip Code of mailing  
Address:: 02167

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Motomu

Family Name:: Shimaoka

City of Residence:: Brookline

State or Province of  
Residence:: MA

Country of Residence::US

Street of mailing address:: 73 Longwood Avenue

City of mailing address:: Brookline

State or Province of  
mailing address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing  
Address:: 02446

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Chafen

Family Name:: Lu

City of Residence:: Newton

State or Province of  
Residence:: MA

Country of Residence::US

Street of mailing address:: 36 Woodman Road

City of mailing address::Newton

State or Province of  
mailing address:: MA

Country of mailing address:: US

Postal or Zip Code of mailing  
Address:: 02167

**Correspondence Information**

Correspondence Customer  
Number:: 000959

**Representative Information**

<b>Representative Customer Number::</b>	000959
---	--------

**Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	Non-provisional	60/229,700	09/01/00

**Assignee Information**

Assignee name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing  
address::  
Country of mailing address::  
Postal or Zip Code of mailing  
Address::